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Application Data Sheet 37 CFR 1.76		Attorney Docket Number	CH-8351/LeA 36481 US
		Application Number	10/534,849
Title of Invention	OPTICAL DATA STORES COMPRISING A CO PHthalOCYANINE HAVING AN AXIAL SUBSTITUENT AND AN AXIAL LIGAND IN THE LIGHT-WRITABLE INFORMATION LAYER		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

Secrecy Order 37 CFR 5.2

<input type="checkbox"/>	Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)
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Applicant Information:

Applicant 1				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Horst		Berneth	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Leverkusen	Country Of Residence ⁱ	DE	
Citizenship under 37 CFR 1.41(b) ⁱ		DE		
Mailing Address of Applicant:				
Address 1		Erfurter Str. 1		
Address 2				
City	Leverkusen	State/Province		
Postal Code	D-51373	Country ⁱ	DE	
Applicant 2				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Friedrich	Karl	Bruder	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Leverkusen	Country Of Residence ⁱ	DE	
Citizenship under 37 CFR 1.41(b) ⁱ		DE		
Mailing Address of Applicant:				
Address 1		En de siep 34		
Address 2				
City	Krefeld	State/Province		
Postal Code	D-47802	Country ⁱ	DE	
Applicant 3				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Wilfried		Haese	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Odenthal	Country Of Residence ⁱ	DE	

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Citizenship under 37 CFR 1.41(b) i		DE	
Mailing Address of Applicant:			
Address 1	Osenauer Str. 32		
Address 2			
City	Odenthal	State/Province	
Postal Code	D-51519	Countryⁱ	DE
Applicant 4			
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
<input type="radio"/> Party of Interest under 35 U.S.C. 118			
Prefix	Given Name	Middle Name	Family Name
	Karin		Hassenruck
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Dusseldorf	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) i		DE	
Mailing Address of Applicant:			
Address 1	Schlehenweg 28		
Address 2			
City	Dusseldorf	State/Province	
Postal Code	D-40468	Countryⁱ	DE
Applicant 5			
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
<input type="radio"/> Party of Interest under 35 U.S.C. 118			
Prefix	Given Name	Middle Name	Family Name
	Serguei		Kostromine
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Swisttal	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) i		RU	
Mailing Address of Applicant:			
Address 1	Allmonde 8		
Address 2			
City	Swisttal	State/Province	
Postal Code	D-53913	Countryⁱ	DE
Applicant 6			
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
<input type="radio"/> Party of Interest under 35 U.S.C. 118			
Prefix	Given Name	Middle Name	Family Name
	Christa	Maria	Kruger
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Schneverdingern	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) i		DE	

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Mailing Address of Applicant:				
Address 1		Vogelleeweg 13		
Address 2				
City	Schneverdingern	State/Province		
Postal Code	D-29640	Country	DE	
Applicant 7				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Timo		Meyer-Friedrichsen	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Krefeld	Country Of Residence	DE	
Citizenship under 37 CFR 1.41(b) i		DE		
Mailing Address of Applicant:				
Address 1		Bodelschwinghstr. 16		
Address 2				
City	Krefeld	State/Province		
Postal Code	D-47800	Country	DE	
Applicant 8				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Josef-Walter		Stawitz	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Odenthal	Country Of Residence	DE	
Citizenship under 37 CFR 1.41(b) i		DE		
Mailing Address of Applicant:				
Address 1		Am Hagen 1		
Address 2				
City	Odenthal	State/Province		
Postal Code	D-51519	Country	DE	
Applicant 9				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Rafael		Oser	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Krefeld	Country Of Residence	DE	
Citizenship under 37 CFR 1.41(b) i		DE		

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Mailing Address of Applicant:				
Address 1		Buschstr. 171		
Address 2				
City	Krefeld	State/Province		
Postal Code	D-47800	Country	DE	
Applicant 10				
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
				<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Rainer		Hagen	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Leverkusen	Country Of Residence	DE	
Citizenship under 37 CFR 1.41(b) i		DE		
Mailing Address of Applicant:				
Address 1		Damaschkestr. 2a		
Address 2				
City	Leverkusen	State/Province		
Postal Code	D-51373	Country	DE	
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button. 				

Correspondence Information:

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).	
<input type="checkbox"/> An Address is being provided for the correspondence Information of this application.	
Customer Number	34947
Email Address	 

Application Information:

Title of the Invention	OPTICAL DATA STORES COMPRISING A CO PHTHALOCYANINE HAVING AN AXIAL SUBSTITUENT AND AN AXIAL LIGAND IN THE LIGHT-WRITABLE INFORMATION LAYER		
Attorney Docket Number	CH-8351/LeA 36481 US	Small Entity Status Claimed <input type="checkbox"/>	
Application Type	Nonprovisional		
Subject Matter	Utility		
Suggested Class (if any)		Sub Class (if any)	
Suggested Technology Center (if any)			
Total Number of Drawing Sheets (if any)		Suggested Figure for Publication (if any)	

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Publication Information:	
<input type="checkbox"/>	Request Early Publication (Fee required at time of Request 37 CFR 1.219)
<input type="checkbox"/>	Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.

Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.			
Please Select One:	<input checked="" type="radio"/> Customer Number	<input type="radio"/> US Patent Practitioner	<input type="radio"/> US Representative (37 CFR 11.9)
Customer Number	34947		

Domestic Priority Information:

This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.			
Prior Application Status		Remove	
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
Additional Domestic Priority Data may be generated within this form by selecting the Add button.			

Foreign Priority Information:

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).			
			Remove
Application Number	Country ⁱ	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
PCT/EP2003/012280	WO	2003-11-04	<input checked="" type="radio"/> Yes <input type="radio"/> No
Additional Foreign Priority Data may be generated within this form by selecting the Add button.			

Assignee Information:

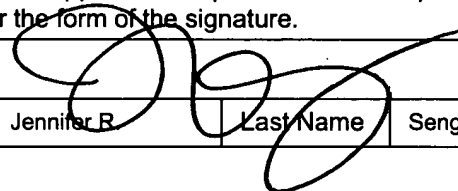
Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.	
Assignee 1	
If the Assignee is an Organization check here.	<input checked="" type="checkbox"/>

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Organization Name	LANXESS Deutschland GmbH		
Mailing Address Information:			
Address 1	D-51369		
Address 2			
City	Leverkusen	State/Province	
Country ⁱ	DE	Postal Code	
Phone Number		Fax Number	
Email Address			
Additional Assignee Data may be generated within this form by selecting the Add button.			

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.			
Signature			Date (YYYY-MM-DD) 2006/8/3
First Name	Jennifer R	Last Name	Seng
Registration Number		45851	

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**